

U.S. Department of Justice
United States Marshals Service**PROCESS RECEIPT AND RETURN**

See "Instructions for Service of Process by U.S. Marshal"

PLAINTIFF United States of America	COURT CASE NUMBER 17-00200
DEFENDANT HEATHER KLINE f/k/a HEATHER L. ECK	TYPE OF PROCESS Sale

SERVE AT { NAME OF INDIVIDUAL, COMPANY, CORPORATION, ETC. TO SERVE OR DESCRIPTION OF PROPERTY TO SEIZE OR CONDEMN
HEATHER KLINE f/k/a HEATHER L. ECK
 ADDRESS (Street or RFD, Apartment No., City, State and ZIP Code)
173 East Main Street, Rebersburg, PA. 16872 (Centre County)

SEND NOTICE OF SERVICE COPY TO REQUESTER AT NAME AND ADDRESS BELOW

KML Law Group, P.C.
 701 Market
 Suite 5000
 Philadelphia, PA 19106

Number of process to be served with this Form 285

Number of parties to be served in this case

Check for service on U.S.A.

FILED
HARRISBURG, PA

JAN 04 2018

Per ADA

Clerk

SPECIAL INSTRUCTIONS OR OTHER INFORMATION THAT WILL ASSIST IN EXPEDITING SERVICE (Include Business and Alternate Addresses, All Telephone Numbers, and Estimated Times Available for Service):

Fold

Fold

Minimum Bid: \$7,599.00

Sale: January 03, 2018 at 11:00 a.m.

Centre County Courthouse: Allegheny & High Streets, Bellefonte, PA. 16823

Signature of Attorney other Originator requesting service on behalf of:

☒ PLAINTIFF☐ DEFENDANT

TELEPHONE NUMBER

215-627-1322

DATE

12/28/17

SPACE BELOW FOR USE OF U.S. MARSHAL ONLY-- DO NOT WRITE BELOW THIS LINE

I acknowledge receipt for the total number of process indicated. (Sign only for USM 285 if more than one USM 285 is submitted)	Total Process 1	District of Origin No. 67	District to Serve No. 67	Signature of Authorized USMS Deputy or Clerk <u>[Signature]</u> DATE	Date 12/28/17
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I hereby certify and return that I ☐ have personally served, ☒ have legal evidence of service, ☐ have executed as shown in "Remarks", the process described on the individual, company, corporation, etc., at the address shown above on the on the individual, company, corporation, etc. shown at the address inserted below.☐ I hereby certify and return that I am unable to locate the individual, company, corporation, etc. named above (See remarks below)

Name and title of individual served (if not shown above)

☐ A person of suitable age and discretion then residing in defendant's usual place of abode

Address (complete only different than shown above)

Date 1/2/18	Time 11:00
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Signature of U.S. Marshal or Deputy

Service Fee \$162.50	Total Mileage Charges including endeavors \$17.85	Forwarding Fee —	Total Charges \$180.35	Advance Deposits —	Amount owed to U.S. Marshal* or (Amount of Refund*) \$180.35
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REMARKS:

1 Desk 2 1/2 hrs. 105 miles round trip.

DISTRIBUTE TO:

1. CLERK OF THE COURT
2. USMS RECORD
3. NOTICE OF SERVICE
4. BILLING STATEMENT*: To be returned to the U.S. Marshal with payment, if any amount is owed. Please remit promptly payable to U.S. Marshal.
5. ACKNOWLEDGMENT OF RECEIPT

PRIOR EDITIONS MAY BE USED

Form USM-285
Rev. 11/13